



# MEMORANDUM OF UNDERSTANDING

## IN-HOUSE PREPARER

THE MOU WILL BE ACTIVATED WITHIN 24 HOURS AFTER THE COMPLETE FORM WITH AN **ORIGINAL SIGNATURE** IS RECEIVED. THE ILRC WILL **NOT** ACCEPT SCANNED, FAXED OR PHOTOCOPIED FORMS.

A **SEPARATE** Memorandum of Understanding (MOU) is required for each individual or organization to be registered through the online filing system.

**PLEASE NOTE:** This form is to be used when an entity designates an employee to prepare documents for the entity or the officers, partners or employees.

1. Name of individual or organization: \_\_\_\_\_  
Address and phone: \_\_\_\_\_
2. Social Security Number for *individual* on Line 1 above: \_\_\_\_\_  
(**REQUIRED** for all individuals)
3. Is the individual an employee of a 501(c)(3) or 501(c)(4)? \_\_\_\_\_ Yes\*\* OR \_\_\_\_\_ NO  
\*\*(If yes, you must provide IRS verification with this form)  
**OR, for an organization, please provide tax identification number below.**
4. Tax Identification Number for *organization* on Line 1 above: \_\_\_\_\_  
(**REQUIRED** for all organizations)
5. Is the business classified as a 501(c)(3) or 501(c)(4): \_\_\_\_\_ Yes\*\* OR \_\_\_\_\_ NO  
\*\*(If yes, you must provide IRS verification with this form)
6. Indiana Interactive username associated with **PREPARER**: \_\_\_\_\_
7. Select the type of registrations to be filed for lobbyist on Line 1:  
\_\_\_\_\_ EMPLOYER LOBBYIST \_\_\_\_\_ COMPENSATED LOBBYIST  
\_\_\_\_\_ BOTH EMPLOYER AND COMPENSATED LOBBYIST

First and Last Name of Preparer: \_\_\_\_\_

Preparer's Employer Name: \_\_\_\_\_

Preparer's Address: \_\_\_\_\_

Preparer's Phone: ( ) \_\_\_\_\_

Email address of person assigned username above: \_\_\_\_\_

I request the approval of the ILRC to submit required filings electronically. I understand that any such submissions will require an electronic signature as described in the Uniform Electronic Transaction Act (See I.C. 26-2-8). This electronic signature may consist of an IN.gov username and any other marks made electronically by the lobbyist in the course of filing that indicate assent to or adoption of the information submitted. The adoption of such an electronic signature has the same legally binding effect as a traditional signature. I affirm my intention to be bound by such an electronic signature on any documents submitted to the ILRC by electronic means.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**ORIGINAL FORM WITH AN ORIGINAL SIGNATURE** should be sent to:

Indiana Lobby Registration Commission  
10 W. Market Street, Ste. 2940  
Indianapolis, IN 46204 PH: 317-232-9860